

**MEETING MINUTES FOR THE
GOVERNOR’S COUNCIL ON BEHAVIORAL HEALTH
THURSDAY, AUGUST 13, 2015**

Members present: Richard Leclerc (Chair), Mark Fields, Bruce Long, Maxine Heywood, Cherie Cruz, Sarah Dinklage, Brian Sullivan

Appointed members present: none

Statutory members present: none

Ex-officio members present: Ruth Anne Dougherty, Chris Strnad (DCYF); Colleen Polselli, Jeffrey Hill (DOH); Ray Neirinckx (OHCD); Sharon Kernan (EOHHS); Denise Achin (RIDE/RITAP); Mary Ann Ciano (DEA); and Lou Cerbo (DOC).

Guests: Lisa Tomasso, George O’Toole (TPC/Anchor); Christopher Mahon (Providence Center School/ALA); August Eddleilson (RIPRC); D. Martins (RI Cares); Rachel Plummer (RI HOD intern)

Staff: Jim Dealy, Oyediya Ezikpe

Review of minutes (Rich Leclerc): A quorum being present, the meeting was called to order. Minutes were approved pending the suggested revisions. Those changes have been made and added to the Amended Minutes to be forwarded to the Committee by Jim Dealy.

Prevention Committee (Sandra Delsesto): Most of the focus at the last Prevention Advisory Committee meeting was on Synar. Contracts are currently being issued to police departments. Thanks to the support of the Governor’s Council, the legislature has allocated money for Synar. The Block Grant supplements state funds but is not sufficient. \$60,000 is required for SYNAR Compliance. \$12,000 comes out of the Block Grant but it is specific to compliance checks only, and cannot fund legal time, court time for the police officers and time for filing the reports. Therefore, \$48,000 is required in state funds, and this has now been allocated by the Legislature.

The Violation rate (the rate of tobacco purchases by minors) has increased from 10% to 12%. If they go above 15%, it puts the 40% of the Substance Abuse Prevention and Treatment Block Grant in jeopardy. A big problem lies with the use of ENDS (Electronic Nicotine Delivery Systems). State law does not consider them to be “tobacco products,”

but federal law does. Legislation went to the General Assembly for Child Protective Packaging and ENDS products policies on liquid nicotine, but it did not pass. This is creating a number of problems. Synar compliance checks can only cover tobacco products under state law so the definition of tobacco products needs to be broadened. Violation rates in states that do not classify ENDS products as tobacco products are increasing. If a violation breaks a municipal ordinance and it matches the state law, all the money goes to the municipality. Also, schools are currently forced to draft their own policies around ENDS products use within the schools. The Prevention Advisory Committee is brainstorming about the next step. Educating the community about ENDS products is important. A fact sheet can be found on ripac.org. The Prevention Strategic Plan was also discussed, and areas of focus in the next 3-5 years were identified, including: community partnerships; sustainability; alcohol, tobacco and other drug specific content; workforce development; and infrastructure. September 30th is the next Prevention Committee meeting from 10am -12pm in Room 226 at Barry Hall building. A recommendation is to check the regulations to see if there is a way of including the enforcement of underage tobacco use.

The Evidence-based Work Group Report is a subcommittee of the Prevention Advisory Committee. The workgroup's purpose is to develop specific guidelines for ascertaining whether a given practice, policy, or program meets the existing standards for evidence-based practices in behavioral health. It also identifies the process by which innovative locally developed behavioral health practices could be designated as evidence-based practice. This work group is required under SAMSHA Partnership for Success Initiative, which is funding 12 communities to implement evidence-based practices. It is designed to bring together a panel, primarily of researchers, to develop criteria for establishing whether a practice meets the criteria for an evidence-based practice. The next step for the group is to finalize the three tiers of evidence based practice.

Block Grant update (Jim Dealy): The Block Grant Application is due September 1st and it is currently being written. A special meeting of the Governor's council to review the draft Block Grant Application will be held on August 25th. Because of the fact that the state has already had to contract for the 2016 Block grant funds by the time the federal BG funds are awarded, planning for next year's (FY 2017) Block Grant needs to be largely done by January, 2016. The Block Grant planning team will start this process as soon as this year's Block Grant Application is submitted. BHDDH and DCYF are asking the Governor's Council to participate in monthly planning meetings devoted to planning for next year's Block Grant. The focus will be on identifying areas of need in our behavioral healthcare system and identifying plans and resources to meet those needs.

Members expressed interest in expanding the work of the evidence-based work group to include EBPs for treatment as well as prevention and using more of the data pulled from the SEOW in assessing the state's needs. BHDDH is also working with RIC and URI to obtain Master's level interns to help with needs assessments as well as grant applications. It is also working with Medicaid to see whether some of the things that are currently funded by the Block Grant may become Medicaid funded, which would free up Block Grant dollars for other uses.

RI Peers Recovery Specialists (Judith Fox): (Refer to PowerPoint handout) A peer recovery specialist is someone with lived experience who provides services that are recovery oriented, offers insight, and support. It includes both Mental Health and Substance Abuse. This service is a big shift in the paradigm of care, and the emphasis is on recovery by providing access to treatment and support services to meet people's individual needs. In 2014 BHDDH started receiving federal money from BRSS TACS, which is part of SAMSHA, to implement and to develop some of the infrastructure for the peer services. BRSS TACS is Federal money that supports states in designing and implementing strategic policies, practices and financing mechanisms and infrastructures to promote the implementation of recovery oriented supports, services and systems. The most important part of BRSS TACS is assembling a team that combines all the stakeholders throughout the state. The list of agencies that are represented as part of BRSS TACS is on the chart in the handout. There is also money allocated from the Block Grant for training and peer services. The RI Certification Board has information on peer certification on its website, and maintains a list of peer specialists certification and trainings.

Update from BHDDH (Becky Boss): The Medication Assisted Treatment TCE grant was not received. BHDDH is still waiting to hear on the Offender Reentry Grant. August 19th will be the first meeting of the Governor's Overdose Task Force, which is open to the public. There is a 50 state meeting convening in Washington on overdose in September and Becky Boss has been asked to present at that meeting. Rhode Island will be getting some national press attention about its efforts. BHDDH and Medicaid have been making plans with the Drug and Alcohol Treatment Association around substance abuse and residential treatment. There have been some very positive ideas. We will reconvene to see how that is going to work out in terms of short-term and long-term strategy with substance abuse and residential treatment, making sure that we are using evidence-based practices. It does not look like we are going to be able to maintain the 29 residential treatment beds that have closed in Woonsocket. Alternate locations are being pursued but the outcome is unclear. For the two grants that have been received, we are looking for high-level people as project directors who can do policy exchange work. There will be a National Drug Take

Back Day on September 26th sponsored by DEA. Local communities are participating through the Substance Abuse Prevention Coalitions and also the local police departments. Check the DEA website or the RIPRC.org for listings of location. Providence is having a special Take Back Day event in collaboration with CVS – more information to come. Don't forget the Rally4Recovery on the 19th at Roger Williams National Park.

Update from EOHHS (Deb Florio): OHHS is currently focusing on the Reinventing Medicaid initiative. The RM Committee has issued a report of initiatives that shows how this state can save approximately \$50 million dollars in the Medicaid budget. What we are doing now in conjunction with our sister state agencies as part of EOHHS is fine-tuning every initiative, developing work plans and establishing specific things that need to be in each one. In some cases they are very specific already and in others cases, they are grand ideas in the sky that sound good but have to be worked out. A stakeholder group is being formed that will have its first meeting in a few weeks. We have a great deal of work to do to make these initiatives a reality, either in our state plans or in our Waivers. Our responsibility now is to identify all the things we want to do and then identify the barriers that make it difficult to implement things within the time frame that has been provided. Clearly the impetus is to get these things operative. There are approximately 45 initiatives – including those focusing on behavioral health, housing stabilization, state agency consistency, medication cost.

Update from DCYF (Chris Strnad): DCYF's primary initiative at this point to set up claiming for EBP home-based services. We are looking to save about \$750,000.00 in FY 2016. Harvard has agreed to work with us on a contracting process. We are working on a model for accessing the level of risk to children who are in their homes. We have extended all contracts, some for three months and others for six, while we evaluated all of them.

Old/New Business (Rich Leclerc): Jim asked that everyone please provide their email address if they are **not** currently receiving his emails and are regularly attending our meetings.

The VA is having a Mental Health Summit on September 10th.

The names of four individuals have been submitted to the Governor's Office for consideration as members of the Governor's Council. It is our goal to have a full slate of members before the SAMHSA application is sent in. We are checking with members who have not attended in over a year. If they are unable or unwilling to continue on the Counsel, we are requesting that they forward a letter of resignation so that their slot can be replaced.

On October 23rd RISAS will host a half-day conference on upstream approaches to improving behavioral health for children at the Crown Plaza in Warwick, Rhode Island. You have until August 31st to receive a discount for early registration.

Michelle managed to get a quick turn-around on the SAMSHA grant application and within about two weeks we received word that we would be receiving it. Great work, Michelle!

The meeting was adjourned by vote of the members.

Next Meeting: Tuesday, September 8, 2015, 1:00 P.M.

Barry Hall

Conference Room 126

14 Harrington Road, Cranston, RI 02920

Statutory and Public members, please let Jim Dealy know if you cannot attend

This meeting is open to the public.

If you plan to attend and you require special accommodations to ensure equal participation, please contact Jim Dealy at the Division of Behavioral Healthcare Services at 462-0118.